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7590

10/22/2003

Susan E Lingenfeller
 ZymoGenetics Inc
 1201 Eastlake Avenue East
 Seattle, WA 98102

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| | |
|------------------|--------------------|
| Kim M. Goplen | (Depositor's name) |
| | (Signature) |
| November 3, 2003 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 09/617,389 | 07/17/2000 | Si Lok | 96-06C3 | 8485 |

TITLE OF INVENTION: TESTIS-SPECIFIC INSULIN HOMOLOG POLYPEPTIDES

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO | \$1330 | \$0 | \$1330 | 01/22/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|------------------|----------|----------------|
| NOLAN, PATRICK J | 1644 | 424-198100 |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Shelby J. Walker

2. _____

3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

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(A) NAME OF ASSIGNEE

ZymoGenetics, Inc.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Seattle, Washington

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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- ☐ Publication Fee
- ☒ Advance Order - # of Copies 7

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(Authorized Signature) Shelby J. Walker (Date) 11/3/03

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 02 FEB 2004 1330-00 11

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